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ADD

OFFICE USE

Initial Application Date _____

Application Completed _____

Application # _____

CITY OF ASHEVILLE TENANT OCCUPANCY APPLICATION

PLEASE PRINT CLEARLY AND USE BALL POINT PEN

RETURN APPLICATION TO THE DEVELOPMENT CENTER AT:

161 S. CHARLOTTE ST. ASHEVILLE, NC 28801

Location: _____ **PIN#:** _____

Property Owner: _____

Name of Business: _____ **Space#:** _____ **Business Owner:** _____Change of Use ☐ YES ☐ NO Previous Use _____ If Vacant, How long _____

Mailing Address _____

City _____ State _____ Zip _____ Phone# _____

Description of Work:

Permits Requested		Plans Submitted	Plans to be Submitted		Cost of Work	Permit Fees
<input type="checkbox"/>	Building	NA	NA		\$	\$
<input type="checkbox"/>	Fire	NA	NA		\$	\$
					\$	
				Total Project Cost	\$	\$
					4% Technology	\$
					Total Fee	\$

Tenant Signature_____
Address_____
City/State/Zip_____
Print Name_____
Phone#_____
Pager# or Cell#_____
Fax#

I hereby certify that all information in this application is correct and all work will comply with the State Building Code and all other applicable State and local laws and ordinances and regulations. The Inspection Department will be notified of any changes in the project permitted herein.

Call for site inspection:**Fire Inspector 259-5441**